

Written testimony of MI Air MI Health
IN OPPOSITION OF SENATE BILLS 437 and 438
Presented to the Senate Energy and Technology Committee May 4, 2016

Introduction and connection to health:

My name is Kindra Weid. I am a registered nurse and a public health advocate. I testify today on behalf of the MI Air MI Health Coalition, which is a diverse coalition of health organizations and health professionals – including doctors, nurses, scientists, and public health workers – that want to improve outdoor air quality and the health of people across Michigan. Our vision is simple: every Michigander should be able to breathe clean air.

There is a robust body of research that has linked several health outcomes, such as asthma, chronic respiratory conditions, heart disease, and cancer to poor outdoor air quality. The Senate Energy and Technology Committee is well aware that Michigan obtains over half of our energy supply primarily from coal-fired power plants. Burning coal emits toxic levels of hazardous substances into the air, such as particulate matter (soot), sulfur dioxide (smog), mercury, arsenic and lead. These toxic pollutants have a negative impact on air quality and our collective health. They serve as triggers to the health conditions listed above, of which Michigan suffers from disproportionately higher rates in comparison to the rest of the country. Therefore, the energy decisions you are deliberating today will have a direct impact on the air quality and health of your constituents and my patients, as well as the air you and I breathe every day.

Why I'm writing to you today: HEALTH

I'm writing to the Senate Energy and Technology Committee in strong **opposition** to Senate bills 437 and 438 because they fail to stress the importance of public health and fail to hold utility companies accountable for transitioning to clean, renewable energy. Often, legislature is enacted without careful consideration of the long-term, downstream impacts on public health. The Flint water crisis is our most recent and devastating example of this sort of short-sighted public policy.

As an intensive care nurse in Southeast Michigan, I take care of patients with chronic lung conditions, heart disease and cancer that are able to stay out of the hospital on a fine balance of medical care and medicine. If something throws off that balance, for example, an ozone action day or a day with elevated levels of smog, these conditions can get exacerbated and require emergent medical attention. Sometimes, this is a trip to the Emergency Department to treat an asthma attack; however, this can also lead to an admission to the hospital on a ventilator for days to weeks at a time due to respiratory or cardiac arrest.

Environmental justice:

As a nurse, I pride myself in providing the best care possible to get my patients healthy, home and back to their lives. How can I help them when the air they breathe is making them sick? Air pollution is unique in that the concentration and distribution of exposure is uncontrollable; therefore, exposure is not evenly distributed across Michigan. Often, it disproportionately impacts our *most vulnerable populations*, such as the low-income families, people of color, children, and seniors who live in close proximity to coal-fired power plants. We have no control over these types of exposures; however, policymakers do.

Please consider the following:

- Michigan has a higher percentage of adults and children with asthma and a higher asthma hospitalization rate compared with the United States. ^{1, 2}
- Michigan currently ranks 5th in the nation in premature deaths, hospital admissions, and heart attacks attributed to coal-fired power plant pollution.
- Our lung cancer rate is higher than 31 other states and Michigan ranks 9th in the nation for the highest number of deaths due to cardiovascular disease, including heart disease and stroke, per 100,000 population. ^{4,5}
- More specifically, the pollution from Michigan's nine oldest coal-fired power plants has been linked to 68,000 asthma exacerbations and 180 premature deaths each year.

Ask:

I am asking you to please consider the link between energy production and your constituents' health. By eliminating standards for renewable energy and energy efficiency, we will be taking a step backwards and negatively impacting Michigan's air quality. I encourage you to consider the downstream, long-term impacts of the decisions you are deliberating today. Investments in renewable energy and energy efficiency will improve Michigan's air quality, improve public health, and save millions of state Medicare/Medicaid dollars spent treating exacerbations of these health conditions. Please remember, although some of us are exposed more than others based on our unfortunate proximity to coal-fired power plants, *none of us* can avoid this exposure and it does and will impact the health of all of us.

Thank you for your time and consideration.

Regards,

Kindra Weid, RN, BSN, MPH

Kindra Weid

MI Air MI Health, Coalition Coordinator

kindra@miairmihealth.org

References:

- 1. Centers for Disease Control and Prevention. Chronic Disease Indicators: www.cdc.gov/cdi
- 2. Centers for Disease Control and Prevention. Data, Statistics, and Surveillance: www.cdc.gov/asthma/asthmadata
- Environmental Health & Engineering, INC. (2011) prepared for the Michigan Environmental Council. Public health impacts of old coal-fired power plants in Michigan. Retrieved from MEC website: http://environmentalcouncil.org/mecReports/PublicHealthImpactsofOldCoal-FiredPowerPlantsinMichigan.pdf
- 4. Centers for Disease Control and Prevention. Lung Cancer: http://www.cdc.gov/cancer/lung/statistics/state.htm
- 5. http://www.americashealthrankings.org/MI/CVDDeaths